

# **Indiana State Board of Nursing**

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## **Education Subcommittee Meeting July 16, 2008**

### **Attendees:**

Marcia Miller  
Mindy Yoder  
Michelle Hines  
Ernie Klein  
Betsy Lee  
Phyllis Lewis  
Dawn Welch  
Nancy Dillard  
Marcia Laux  
Judy Halstead  
Sean Gorman

### **1. Introductions**

### **2. Previous Discussion Items Follow-Up**

#### **a. Preceptor Requirements:**

Discussion continued to the next meeting.

#### **b. Faculty Qualifications:**

Judy Halstead conducted research on the faculty qualifications requirements by other state boards of nursing for nurse education programs. Ms. Halstead broke down a report for the Education Subcommittee that detailed the educational qualifications, work experience, and other requirements for both LPN programs and RN programs.

##### **LPN Programs:**

*Educational Qualifications:* All states reviewed required a minimum of a BSN to teach with the exception of North Dakota, which requires a master's degree with coursework in nursing if the degree is not a MSN. Some states stipulated that clinical faculty for LPN programs may be allowed to teach without a completed BSN degree as long as they had plans in place to complete the degree. New Jersey allows faculty to teach without a BSN if they were hired prior to 1981.

*Work Experience:* Most states reviewed did not address a practice requirement in order to be eligible to teach, but for those that did the requirement ranged from 1-3 years of experience in direct patient care, with 2 years being the most common requirement. The state of Louisiana required 3 years of experience and

specifically stipulated that one of those years must be in a medical-surgical direct patient care.

*Other requirements:* A few state mandated that those assuming a faculty role in LPN programs should also have educational preparation in adult education and teaching/learning principles (Utah, Kentucky, Hawaii).

#### RN Programs:

*Educational Qualifications:* Of the 39 states reviewed, 8 specifically indicated that a MSN was required to teach in a RN preparation program. Other states reported a variation of this requirement.

*Work Experience:* 17 of the states stipulated a specific number of years of experience in providing direct patient care were required to be a nursing faculty member. This ranged from 1 year to 3 years of full time experience, with 2 years being the most common requirement. Hawaii's rules indicate that MSN prepared faculty need 1 year of relevant clinical experience; BSN prepared faculty need 3 years of experience.

*Other requirements:* Other requirements that were addressed in the rules and regulations included the need for preparation in educational content (teaching and learning principles) which was required by 5 states: Hawaii, Utah, Wyoming, North Carolina, Minnesota, and Kentucky. There were some states that also addressed the qualifications of those faculty strictly hired to teach clinical. Overwhelmingly, the BSN was the degree required to teach clinical nursing. One exception was the state of Arkansas which state the individual needed to be prepared one level above the program they were teaching in. Kansas required a plan for clinical teachers achieving a graduate degree if not already held. Idaho stated "support" faculty may hold a BSN". Arizona required 3 years of experience for BSN prepared clinical faculty, while South Carolina required 2 years for BSN prepared clinical faculty.

The Subcommittee discussed potential changes to Indiana's faculty qualifications and agreed to recommend a change from requiring a master's degree to requiring a graduate degree – this will accommodate potential faculty hires who have achieved a doctoral level degree straight from their bachelor's.

- c. **Simulation Clinical Hours:** The Subcommittee continued discussion on the inclusion of a definition of "simulation" in the rules. Mindy Yoder recommended a broad definition authored by the NCSBN. There was some discussion on whether the Board should only be concerned with so-called hi-fidelity simulation, as it offers the greatest risk to traditional clinical experiences. The

Subcommittee agreed to recommend the NCSBN definition be included at 848 IAC 1-2-16:

**848 IAC 1-2-16**

*Add the following information as **new** “(f)” placed immediately before the old “(f)” which starts with “Observational experiences...”*

(f) “Simulation experiences shall be determined by the philosophy, mission, and objectives of the program. As used in this subsection, “simulation experiences” means

an educational strategy which imitates the working environment and requires the learner to demonstrate procedural techniques, decision-making and critical thinking (NCSBN, 2005)

Simulation experiences shall:

- (1) be planned, guided and supervised by the faculty
- (2) have clearly defined outcomes
- (3) integrate feedback, debriefing and/or guided reflection
- (4) be included in the program’s annual report to the board

The Subcommittee also agreed to request information be reported in annual reports to be sure that programs are reporting both high fidelity simulation hours and other types of simulation hours (Marcia Laux's request) is to have that spelled out on the template report form. To minimize program tracking issues, Ms. Yoder suggested two categories on the template: (1) high fidelity simulation (2) Other simulation (ie. computer & web based programs, low-fidelity simulation, partial-task trainers).

### **3. New Business**

#### **a. Continued Competency Demonstration**

The Subcommittee discussed the role of the Board in ensuring continued competency for nurses out of the practice or who have let their license lapse. The Subcommittee discussed the importance of employers in ensuring competence. There was also discussion on the potential use of refresher courses for nurses who have been long expired and are coming back into the practice. Refresher courses are valuable because they often offer a clinical component, but are only an option for nurses with a valid license. The Subcommittee discussed the possibility of a temporary limited license for lapsed licensees for the purpose of attending a refresher course. There is no recommendation to the Board at this time, and this issue will be studied for discussion at future meetings.

#### **b. Full-time to Part-time Faculty Ratio Requirements**

The Subcommittee discussed the interpretation of the nursing program faculty requirement that states that “the majority of faculty shall be full-time employees of the institution”. In several instances on nursing programs’ annual reports for 2007, it was noted that by the numbers, there were many programs that had a greater number of part-time faculty members than full-time faculty. Initially, PLA staff reviewing for this provision found these programs noncompliant for this requirement. However, the programs’ response in several cases compared the hours of instruction taught by full-time faculty vs. part-time faculty to determine compliance with the requirement. The Subcommittee agreed to recommend the acceptability of that determination to the Board and to examine potential rule language clarification.

#### **4. Work Assignments and Next Meeting**

For further information, please contact:

**Sean Gorman, Director**  
**Indiana State Board of Nursing**  
**Indiana Dietitians Certification Board**  
Indiana Professional Licensing Agency  
402 West Washington Street  
Indianapolis, IN 46204

**(317) 234-1990**